U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

ı	For Official Use Only
	AUG152005
Ε	Que Control

READ THE INSTRUCTIONS CAREFUL	LY BEFORE PREPARING THIS REPORT.
1. File Number U - 6359	2. Fiscal Year Covered From:
de menerale de de la companya de la	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Anthony D Liberatore, Jr.	Name Laborers' Local 860
	Labor Organization File Number 04/088
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street Street	Street 4220 Prospect Avenue
City Cleveland	City Cleveland
State Ohio ZIP Code + 4 44103	State Ohio ZIP Code +4 44103
5. Position in labor organization. Business Manager/Secretary-Tro	easure(
Enter appropriate data below if, during the past fiscal year, you or your spour (except as specified in the exclusion). A. Held an interest in, engaged in transactions (including loans) with, or comonetary value from an employer whose employees your organization.	sions set forth in the instructions):
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name (
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	7.b. Amount.
City	
State ZIP Code + 4	de manufacture de la primer de manuel partir e de minimulation de la company de la propertie de la propertie d
Signa	
15. Signature and verification. The undersigned declares under penalty of P	
submitted in this report (including the information/contained in any accompanyir undersigned's knowledge and belief, true, correct, and complete. See the sections	
submitted in this report (including the information/contained in any accompanyir undersigned's knowledge and belief, true, correct, and complete. (See the sect Signed	

Name of Person Filing Anthony Liberatore, Jr.		File Number U-
B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	rwise dealing with the business ively seeking to represent, or directly to, or otherwise	;
8. Name and address of Business (including trade name, if any). Name LDC & C Pension Fund of Ohio Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 7420 Worthington-Galena Rd City Worthington State Ohio ZIP Code + 4 43085	9. Business deals with: a. Labor Organiza b. Trust c. Employer	iion
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Ohio Contractors Association Trade Name, if any:	11.a. Nature of such dealing Employer, whose employer to the LIUNA, Local 860 respectively.	ployees District Council and
P.O. Box, Bldg., Room No., if any P.O. Box 909 Street City Columbus	11.b. Approximate dollar value	e of such dealing.
State Ohio ZIP Code +4 43216	Jun 14-16, 2004 IFEBP Trustees a Transportation, Hot	and Administrative Institute el and Meals (\$1860.04)
	12.b. Amount.	\$3,000
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	14.a. Nature of payment.	
Trade Name, if any:		Account on the control of the contro
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	The state of the s	
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	The second probability in the property of the contract of the

Name of Person Filing	Anthony	Liberatore,	Jr
-----------------------	---------	-------------	----

Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name LDC & C Pension Fund of Ohio	a. Labor Organization	
Trade Name, if any:	Torquest	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 7420 Worthington-Galena Rd.	c. Employer	
City Worthington		
State Ohio ZIP Code + 4 43085		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Ohio Contractors Association	Employer, whose employees District LIUNA, Local 860 represent, pays of	ontributions on
Trade Name, if any:	behalf of employees to Trust Fund.	and the second s
P.O. Box, Bldg., Room No., if any P.O. Box 909		
Street (O CONTRACTOR OF THE PROPERTY O
City Columbus		
State Ohio ZIP Code + 4 43216	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	Mileage to October 19, 2004 Board (Cleveland to Columbus and Back)	The state of the s
	(Upon receipt of reimbursement, ch to Local 860.)	eck was submitted
		передори
		endersty's surveyer.
	12.b. Amount.	\$126

Name of Person Filing Anthony Liberatore,	Jr.	File Number U-
·		

Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name LDC & C Pension Fund of Ohio	a. Labor Organization	
Trade Name, if any:	Scientered	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 7420 Worthington-Galena Rd.	c. Employer	
City Worthington		
State Oh10 ZIP Code + 4 43085		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Ohio Contractors Association	Employer, whose employees District LIUNA, Local 860 represent, pays of behalf of employees to Trust Fund	contributions on
Trade Name, if any:		T.
P.O. Box, Bldg., Room No., if any P.O. Box 909		
Street		The state of the s
		· ·
City Columbus	The second section of the secti	t disk freshiot to bridge to the first special power success and a consideration of the consi
State Ohio ZIP Code + 4 43216	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
3 •	Mileage to October 26, 2004 Board to Columbus and Back.	Meeting Cleveland
	(Upon receipt of reimbursement, ch to Local 860.)	eck was submitted
		AAA matau i i i i i i i i i i i i i i i i i i i
		And and Annual Control of the Contro
	12 h Amount	±10C

Name of Person Filing Anthony Liberatore, Jr.

Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name LDC & C Pension Fund of Ohio	a. Labor Organization	
Trade Name, if any:	a. Edboi Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 7420 Worthington-Galena Rd.	c. Employer	
City Worthington		
State Ohio ZIP Code + 4 43085		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Ohio Contractors Association	Employer, whose employees District LIUNA, Local 860 represent, pays co behalf of employees to Trust Fund.	
Trade Name, if any:	Denair of emproyees to frust rund.	
P.O. Box, Bldg., Room No., if any P.O. Box 909		
Street		
City Columbus		
State Ohio ZIP Code + 4 43216	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	NOTE AND ADDRESS OF THE SECOND AND ADDRESS OF THE SECOND AND ADDRESS OF THE SECOND ADDRE
	November 14-17, 2004 IFEBP Healthcare Management Conf Transportation, Hotel, Meals (\$1,37 Conference Expenses (\$930.00)	Terence 74.93)
		and the second s
		enderen waar bestaan daarke end en ze en ee de geveen de geveen de geveen de geveen de geveen de geveen de gev
	12.b. Amount.	\$2,305

Name of Person Filing	Anthony	Liberatore,	Jr
-----------------------	---------	-------------	----

Part B Continuation Page

		• 10
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name LDC & C Pension Fund of Ohio	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 7420 Worthington-Galena Rd.	c. Employer	
City Worthington		
State Ohio ZIP Code + 4 43085		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Ohio Contractors Association	Employer, whose employees District Co LIUNA, Local 860 represent, pays cont	uncil and ributions on
Trade Name, if any:	behalf of employees to Trust Fund.	
P.O. Box, Bldg., Room No., if any P.O. Box 909		and the second s
Street		10 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m
City Columbus		WAX-
State Ohio ZIP Code + 4 43216	11.b. Approximate dollar value of such dealing.	er de de la faction de la f Profesion de la faction de
	12.a. Nature of interest held or income received.	Ann ann an Thursday and Ann ann ann ann ann an Anna an Ann ann ann ann ann an Anna an
	2005 IFEBP Conference November 11-17, 2005 Conference Expense & Hotel Deposit (Pa 2004)	aid in Nov.
	12.b. Amount.	\$1,900

Name of Person Filing	Anthony	Liberatore,	Jr.
-----------------------	---------	-------------	-----

Part B Continuation Page

8. Name and address of Business (including trade name, if any). Name OLDC-OCA Cooperation & Education Trust Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 7420 Worthington-Galena Rd. City Worthington State Ohio ZIP Code + 4 43085	9. Business deals with: a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Ohio Contractors Association Trade Name, if any: P.O. Box, Bldg., Room No., if any P.O. Box 909 Street City Columbus State Ohio ZIP Code + 4 43216	Employer, whose employees District Council and LTUNA, Local 860 represent, pays contributions behalf of employees to Trust fund	
	12.a. Nature of interest held or income received.	
	Mileage to March 16, 2004 Board Me Cleveland to Columbus and Back (Upon receipt of reimbursement, ch to Local 860.)	Per Verialism
	12.b. Amount.	\$127

Name of Person Filing	Anthony	Liberatore,	Jr
-----------------------	---------	-------------	----

Part B Continuation Page

:		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name OLDC-OCA Cooperation & Education Trust Fund	a. Labor Organization	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 7420 Worthington-Galena Rd.	c. Employer	
City Worthington		
State Ohio ZIP Code + 4 43085		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Ohio Contractors Association	Employer, whose employees District LIUNA, Local 860 represent, pays of	: Council and contributions on
Trade Name, if any:	behalf of employees to Trust fund	
DO Por Pide Poom No. If any		
P.O. Box, Bidg., Room No., if any P.O. Box 909		
Street		
City Columbus		
State Ohio ZIP Code + 4 43216	11.b. Approximate dollar value of such dealing.	And the state of t
	12.a. Nature of interest held or income received. Mileage to December 14, 2004 Board Meeting Cleveland to Columbus and Back (Upon receipt of reimbursement, check was submitted to Local 860.)	
÷		
		n Andrews
	and parameters and the second	And the state of the
		n An Amerika
	12.b. Amount.	\$126

Name of Person Filing	Anthony	Liberatore.	ďΥ
Mantie of Leison Linds	MILLIONY	DINCTUROLE!	O T

Part B Continuation Page

`		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name OH Laborers Training & Upgrading Trust Fund Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 7420 Worthington-Galena Rd.	c. Employer	
City Worthington		
State Ohio ZIP Code + 4 43085		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Ohio Contractors Association	Employer, whose employees District Council and LIUNA, Local 860 represent, pays contributions on behalf of employees to Trust fund	
Trade Name, if any:	Delia II of amproyees to 1200 1400	
P.O. Box, Bldg., Room No., if any		
Street		
City Columbus		
State Ohio ZIP Code + 4 43216	ZIP Code + 4 43216 11.b. Approximate dollar value of such dealing.	
	12.a, Nature of interest held or income received.	
	Mileage to September 10, 2004 Board Meeting Cleveland to Columbus and Back	
	(Upon receipt of reimbursement, check was submitted to Local 860.)	
	12.b. Amount. \$127	

	F11 - 61 11
Name of Person Filing Anthony Liberatore, Jr.	File Number U-

Part B Continuation Page

·		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name OH Laborers! Training & Upgrading Trust Fund	a. Labor Organization	
Trade Name, if any:	Nonwood -	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 7420 Worthington-Galena Rd.	C. Employer	
City Worthington		
State Ohio ZIP Code + 4 43085		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	untywagonaminajawannegogogogogogogogogogogogogogogogogogog
Name Ohio Contractors Association	Employer, whose employees District LIUNA, Local 860 represent, pays of behalf of employees to Trust fund	Council and ontributions on
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any P.O. Box 909		330-047 mm or other parts of the parts of th
Street		
City Columbus		men franchisch andet berif in frammeljord at analysis in more in conservations in summer and
State Ohio ZIP Code + 4 43216	11.b. Approximate dollar value of such dealing.	
:	12.a. Nature of interest held or income received.	elitor atteita asamulan sääleeet ja äävat maran seemalan aalana kallinan mitaat maratta seest
	Mileage to November 9, 2004 Board Cleveland to Columbus and Back	Meeting
	(Upon receipt of reimbursement, ch to Local 860.)	eck was submitted
	12 h Amount	\$126